



HEALTHY CITY THRIVING FAMILIES

A Quarterly Report from the City of Minneapolis Department of Health and Family Support

July—August 2003

Secondhand Smoke Exposure Declines

Exposure to tobacco smoke has decreased substantially in the past few years in Minneapolis. The percentage of homes where occupants were exposed to tobacco smoke dropped from 22.6 percent to 16.9 percent between 1998 and 2002, the years the Survey of the Health of Adults, the Population, and the Environment (SHAPE) were administered. The SHAPE data were gathered in extensive interviews of 6,638 Minneapolis residents. The decline represents a decrease of 25 percent of the number of households where tobacco smoke poses a health hazard. Reductions in household tobacco smoke exposure were seen in all 11 Minneapolis planning communities and were statistically significant in Camden, Central, Phillips, and Calhoun Isles.

Importantly, homes with children under the age of six showed a 44 percent decline in household tobacco smoke. According to Council Member Barbara Johnson, a registered nurse whose ward showed major declines in exposure rates, "This change is critical because young children are most vulnerable to the negative health effects of tobacco smoke." This crucial success was reported in various media in June, with stories running in the Star Tribune, Spokesman-Recorder, Southwest Journal, North News and Northeaster, and on MPR, WCCO-AM and WMNN radio stations.

Over the past three years, MDHFS has focused extensively on reducing exposure to secondhand smoke after research showed high rates, especially in two key communities, Near North and Camden. MDHFS formed community partnerships with Pilot City Health Center, Hennepin County Community Health Department, Minneapolis Urban League, Minneapolis Public Schools (Nellie Stone Johnson Elementary School), Way To Grow, North Memorial/University of Minnesota Family Practice Clinic and Fremont Community Health Services to raise awareness of the negative impacts of secondhand smoke, especially on children. A public awareness campaign encouraged parents and child care providers to avoid smoking in homes and cars, according to Judy Brown, Tobacco Prevention Specialist for MDHFS. These efforts were funded by the tobacco endowment, which has been eliminated by state budget cuts. For more information, contact Patty Bowler at 612/673-3009.

NEW LEADERSHIP FOR MDHFS

Ken Dahl has been named as interim director as of May 5, 2003. Ken has 24 years of experience as a City staffer, starting as a vocational counselor in Minneapolis Employment & Training Program (METP). Ken moved to Health & Family Support when METP merged with MDHFS in 1997. Ken holds a master's degree in educational psychology, and spent 17 years of his career serving in many capacities in adult and youth employment programs. During the past six years, he has held manage-

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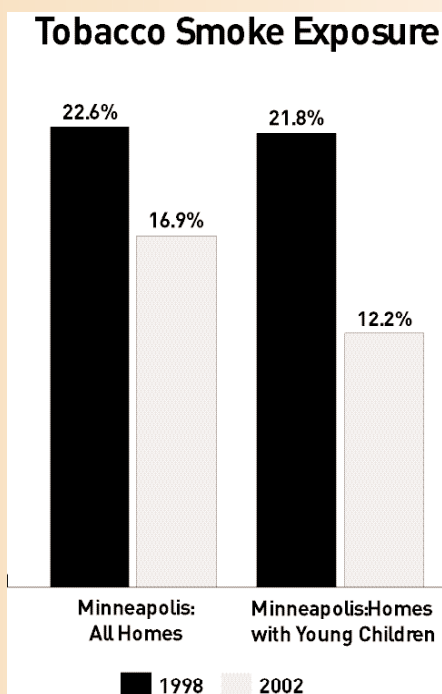
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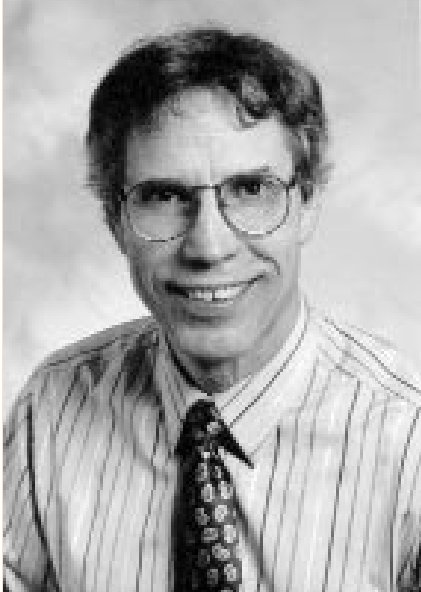
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ment positions within MDHFS, serving in many capacities during transition times. MDHFS welcomes Ken in his new role. He may be reached at 612/673-3798.



The Minneapolis Department of Health and Family Support (MDHFS)

works to ensure that all families are healthy and fully share in the social and economic opportunities of the City of Minneapolis. The MDHFS reaches residents by working in partnership with community organizations, other units of government, schools, and health and human service agencies.

Ken Dahl, Interim Director

Council Member

Natalie Johnson Lee, Chair,
Health & Human Services
Committee

612/673-2301

www.ci.minneapolis.mn.us/dhfs

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Family Home Visiting: A Success

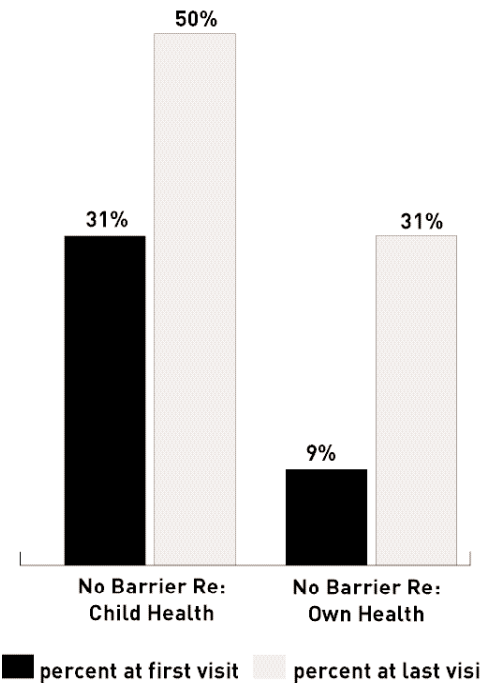
The TANF Family Home Visiting program is a statewide nurse home visiting program. Its purpose is to promote the health and self-sufficiency of some of Minnesota's most vulnerable families. The goals of the program are:

- To promote family self-sufficiency.
- To improve the health and well-being of children and families.
- To reduce out-of-wedlock pregnancies.

In 2002, Wilder Research Center conducted an extensive evaluation of the Minneapolis/Hennepin Family Home Visiting program which uses the Minnesota Visiting Nurses Agency (MVNA) for home visits. This evaluation documented the impact and effective results that MVNA and the Family Home Visiting program produced.

One of the most important findings was that this program helps teen parents stay in school and avoid second pregnancies. 71 percent of all pregnant or parenting teens were enrolled in school, and only 3 percent experienced second pregnancies.

The second key finding is that Family Home Visiting improves the employability of MFIP families by removing family health barriers. The following graph shows the improvement within families with three or more home visits. A 19 percent improvement was reported by



participants who at the first visit reported barriers to employment due to their child's health, and a 22 percent improvement was reported regarding the participant's own health barriers.

Unfortunately, state funding cuts have reduced the Minneapolis budget of this successful program from \$2.2 million down to \$502,451 for fiscal 2004. This 77 percent cut will result in a drastic reduction of clients being served through Family Home Visiting. For more information, contact Gretchen Musicant at 612/673-3955.



Minneapolis kids and seniors play tennis skills games at the Mayor's Day of Play on Saturday, May 17th at Martin Luther King Park. Mayor R.T. Rybak took part in the games and everyone enjoyed hotdogs and refreshments. The Mayor's Day of Play is a unique private/public partnership between Inner City Tennis, the Senior Tennis Players, Minneapolis Park and Recreation Board and the Senior Citizen Advisory Committee to the Mayor and Council.

METP Moves to CPED

Focus Minneapolis is a city initiative to create a more strategic and streamlined approach to the City's planning and development activities. The initiative builds on the recommendations of the McKinsey Report released in 2002. Focus Minneapolis included a directive that City officials examine incorporating a number of different programs in the new office of Community Planning and Economic Development (CPED.) In May, the City Council and Mayor approved the transfer of Minneapolis Employment & Training Program (METP) to CPED. METP will join the Minneapolis Community Development Agency, Planning Department and the Empowerment Zone in the newly created CPED department under the leadership of Lee Sheehy. METP will physically move to the Crown Roller Mill building later this summer. For more information, contact Chip Wells at 612/673-2630.

Carol Aharoni (left), youth director at HIRED, accepted the METP Youth Vendor of the Year award for HIRED at the June 9th Health and Human Services Committee meeting. Committee Chair Natalie Johnson Lee (right) presented the award, as Council Member Paul Zerby looked on.



Urban Health Agenda

The Minneapolis City Council adopted a resolution on May 16th to establish a panel of community leaders and residents to assess the health and human development delivery systems of Minneapolis, and develop recommendations to the Mayor and City Council of Minneapolis and Hennepin County Board regarding structure, accountability, funding and governance. A companion resolution was passed by the Hennepin County Board in June. The following guiding principles about the best way to structure government services to meet the health and human development needs of City residents were also adopted:

Focus on the beneficiaries. The needs of the people who live in Minneapolis are foremost. Decisions and activities must help children and adults live better, healthier, and safer lives. We must eliminate the disparities between racial/ethnic and income groups in health and opportunities for development.

Listen and respond to community voices. Government must respect and benefit from the knowledge, abilities, and inventiveness of ordinary citizens, community leaders, and community agency staff who

confront problems and overcome obstacles daily. Productive and sustained partnerships are the only way to ensure that the people who live and work in the City identify needs, craft solutions, and target limited resources. Partnerships must capitalize on the rich diversity that our urban environment offers.

Demand a focus on the uniqueness of the urban environment. Planning must take into account the effects on resident health of concentrated poverty, unemployment, discrimination, and crime; dense and older housing; industrial neighborhoods; and mobility of residents. Planning must also address the needs of new arrivals and people with varied cultures, traditions, and languages.

Provide leadership. Leadership must inspire innovation, community engagement, and the commitment to do better. Government leaders need to remain accountable to City residents and must be willing to engage in difficult and controversial issues. Leaders must be willing to take a stand on behalf of addressing reproductive health issues and the rights of adolescents to seek necessary care in a safe and confidential environment.

Promote entrepreneurship. Creative government activities are needed to bring more resources of all kinds into the City to strengthen community service providers and to address priority needs.

Require efficiency and effectiveness. Government roles should be complementary and clearly articulated. Local government should not do what the community can do. Government resources should be leveraged to ensure the best return on public investments. Use research to inform decisions, evaluate activities, and identify next steps.

Use data to drive action. Information about community needs and health outcomes must guide the use of human and financial resources. Data needs to be used to engage communities in helping to generate solutions. Reports and studies need to lead to action with measurable benefits to City residents.

The entire resolution is online at <http://www.ci.minneapolis.mn.us/citywork/clerk/actions/2003-05-16.pdf> or call Ken Dahl at 612/673-3798.

Healthy City Updates

New Funding Awards

Twin Cities Healthy Start has been granted \$925,000 for its third year of operation from the federal Health Resources Services Administration. Healthy Start has also been awarded \$5,000 from the Archie D. & Bertha H. Walker Foundation for its Fetal Alcohol Syndrome (FAS) is 100% Preventable Project. The Sheltering Arms Foundation has awarded \$10,000 to Fremont Community Health Services as fiscal agent for MDHFS' "What If?" protocol, which promotes adolescent male involvement in School-Based Clinics.

Award for Improved Immunization Rates

Minnesota Department of Health Commissioner Dianne Mandernach has recognized MDHFS for significant improvement in immunization rates for children at 24 months of age. Minneapolis was the most improved area with more than 1000 kindergartners according to the 2001-2002 Statewide Retrospective Kindergarten Immunization Survey. Congratulations to MDHFS' community stakeholders who have helped make this vision a reality.

International Recognition from Australia

Pat Harrison, Research Director, has heard from the Victorian Health Promotion Foundation about a paper she and epidemiologist Gopal Narayan authored in the *Journal of School Health*. Using MN Student Survey data, they conclude that children and teens are more likely to engage in risk-taking behavior if they are not involved in physical and social activities. The Australian media picked up this story, and has generated heightened interest in this research. Good work, mates!

Youth Leaders in Training

Earlier this spring, MDHFS sponsored a Leadership Conference for 73 youth representing agencies such as Hmong Mutual Assistance Association, Family and Children's Services, TAMS (Teenage Medical Services), Indigenous People's Task Force, YMCA Leaders Club, and The City Inc. Youth reported that they learned how to speak to large groups, how to set personal goals, the value of working together, and that they felt more successful, hopeful, and confident.

Staff on the Move

David Doth, past Commissioner, has moved on to a new role with a national consulting group. David started at MDHFS in early 1999, and gained a reputation as an innovator within City government. He is remembered for his leadership in policy development, wide-ranging intellect, and passion for community building.

Pat Hartmann, longtime clerk for the School-Based Clinics, has retired after 15 years of service. Pat was known for her ability to answer questions, locate long-lost supplies, and compassion for student clients. Thanks for your great work, Pat!

Sue Hebeisen, R.N., School-Based Clinics, received an award in May from the MN Organization on Adolescent Pregnancy, Prevention and Parenting. Sue has worked with pregnant and parenting teens for eight years, providing education and counseling. Sue also has helped develop the "Not Ready Now" program to help parenting teens prevent subsequent pregnancies while still in school.

FAST FACTS Legislative Recap

Eliminating Health Disparities

Core funding for implementation grants was preserved. No future planning grants will be funded.

TANF Safety Net Programs

Family Home Visiting funding for pregnant and parenting teens and MFIP families was cut 77 percent starting July 1, 2003. Total cut to MDHFS: \$1.7 million.

Health Care Safety Net Programs

Less people eligible for GAMC, MinnesotaCare, and Medical Assistance, including cuts to children, pregnant women, and newborn babies.

Tobacco Endowment Eliminated

The Youth Risk Behavior (YRB) funding has been eliminated, along with a 86 percent cut in youth tobacco use prevention funding. Total cut to MDHFS: \$348,451.

Public Health Block Grants

Funding for local public health agencies has been consolidated from several sources and reduced. Total cut to MDHFS: \$1.86 million, including TANF Family Home Visiting

Family Planning

2004 fiscal year funding intact at \$4.96 million statewide, but was reduced 25 percent for fiscal year 2005. Gag rules were not imposed.

Minor Consent

No changes to this important law protecting the privacy of teens seeking medical care for reproductive health, mental health, and chemical dependency issues.

Youth Employment & Training

Total reduction statewide from \$6 million to \$4 million. Total cut to METP youth programs: \$200,000 (33% total funding).

Call Patty Bowler at 612/672-3009 for the full four-page summary.